

[Previous on List](#) [Next on List](#) [Return to List](#)[Filing History](#)

Fictitious Name Search

Submit

Fictitious Name Detail

Fictitious Name

COMMAND ARMS ACCESSORIES

Filing Information

Registration Number G15000094519
Status ACTIVE
Filed Date 09/15/2015
Expiration Date 12/31/2020
Current Owners 1
County BROWARD
Total Pages 2
Events Filed 1
FEI/EIN Number 26-0753280

Mailing Address

3901 NE 12TH AVE STE 200
POMPANO BEACH, FL 33064

Owner Information

ME TECHNOLOGY INC
3901 NE 12TH AVE STE 200
POMPANO BEACH, FL 33064
FEI/EIN Number: 26-0753280
Document Number: F15000003965

Document Images

[09/15/2015 -- REGISTRATION](#)

View image in PDF format

[07/30/2019 -- CHANGE NAME/ADDRESS](#)

View image in PDF format

[Previous on List](#) [Next on List](#) [Return to List](#)[Filing History](#)

Fictitious Name Search

Submit

APPLICATION FOR REGISTRATION OF FICTITIOUS NAME

Note: Acknowledgements/certificates will be sent to the address in Section 1 only.

Section 1

1. Command Arms Accessories

Fictitious Name to be Registered (see instructions if name includes "Corp" or "Inc")

ME Technology Inc

William Leigh Dr

Mailing Address of Business

Tullytown, PA 19007

City

State

Zip Code

3. Florida County of principal place of business: Broward

(see instructions if more than one county)

FEI Number: 26-0753280

15 SEP 15 AM 6:17

G15000094519
09/15/15--01004--029 **\$0.00

This space for office use only

Section 2

A. Owner(s) of Fictitious Name If Individual(s): (Use an attachment if necessary):

1.

Last First M.I.

Address

City State Zip Code

2.

Last First M.I.

Address

City State Zip Code

B. Owner(s) of Fictitious Name If other than an individual: (Use attachment if necessary):

1.

ME Technology Inc. (Florida)

Entity Name

3901 NE 12th Ave Suite 200

Address

Pompano Beach, FL 33064

City State Zip Code

Florida Document Number F15000003965

FEI Number: 26-07532800

☐ Applied for ☐ Not Applicable

2.

Entity Name

Address

City State Zip Code

Florida Document Number

FEI Number:

☐ Applied for ☐ Not Applicable

Section 3

I the undersigned, being an owner in the above fictitious name, certify that the information indicated on this form is true and accurate. In accordance with Section 865.09, F.S., I further certify that the fictitious name to be registered has been advertised at least once in a newspaper as defined in chapter 50, Florida Statutes, in the county where the principal place of business is located. I understand that the signature below shall have the same legal effect as if made under oath and I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Signature of Owner in Section 1

09/11/2015

Date

jay@commandarms.com

E-mail address: (to be used for future renewal notification)

Phone Number: 215 696-1500

Section 4

FOR CANCELLATION COMPLETE SECTION 4 ONLY:

FOR FICTITIOUS NAME OR OWNERSHIP CHANGE COMPLETE SECTIONS 1 THROUGH 4:

I (we) the undersigned, hereby cancel the fictitious name _____
_____, which was registered on _____ and was assigned
registration number _____

Signature of Owner of Registration being Cancelled

Date

Signature of Owner of Registration being Cancelled

Date

Mark the applicable boxes

☒ Certificate of Status — \$10

☐ Certified Copy — \$30

NON-REFUNDABLE PROCESSING FEE: \$50

SEP 15 2015

R. HUNT

CR4E001 (8/15)